WASTE RECEIPT # 9605842 SHIPPER ID#

GENERATOR Odegards Body Shop MANIFEST # 52750

DRUM#	DESCRIPTION		% OF SOLIDS	% OF SLUDGE	% OF LIQUID	DRUM SIZE	TOTAL	PROFILE#	STORAG
01	Acetone, Tohuene		00	10	90		GALLONS		LOCATIO
-	4-1		1 : .	10	40	55	55g	11792	TF# 4
-									
			1.					,	
	•	F							
				-		-			
			- 4						
		-							
		-							
		1	- 1						
1			-					1	· .
-			. 1						-
7			7					. /	
		-						* 7	
	· .	•				1 1		,	

USEPA SF

DATE 7-21-99

RECEIVERS SIGNATURE-Make (000

Emergency Contact Telephone Number

	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's U	S EPA ID No.	Manifest Document No.	2. P	age 1 Information of requirements	tion in the	e shaded areas is ederal law.			
1	Generator's Name and Mailing Address	-33	A State Manifest Document Number 990252750A								
	4. Generator's Phone () TACOMA WA 98609					B. State Generator's ID					
							D				
	1						D. Transporter's Phone E. State Transporter's (253) 627–1976 F. Transporter's Phone				
	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		tate Facility's ID	h visiti	entroppical a						
	1510 Taylor Way Tacoma WA 98421		WAD980738512			H. Facility's Phone					
1	US DOT Description (Including Proper Shipping N HM	lame, Hazard Clas	s, and ID Number)	12. Cor No.	ntainers	Total	06) _{4.} Unit	1. I.			
a	X RQ, WASTE FLAMMABLE LIQU N.O.S., 3,PG II, UN1993,(Acetone, Toluene	ID,		000	000	00000		D001 D035 P003			
G b.		EZATIED GIL	MATERIAL	/	DM	55	4	0001,000 0035,0043			
A C.											
d.	Additional Descriptions for Materials Listed Above							المحمدة الأراض			
1//	a. Acetone, Toluene, Mineral S. PROPILE # 11792 Special Handling Instructions and Additional Inform	Appropriate propriet	thanol,Xylene	ti) Teepis (j. 2019: Leonaldo	a. F	SUBS					
11	a. Use ERG# 128 for 11a, For		y 1-800-282-812	8		7					
16.	GENERATOR'S CERTIFICATION: I hereby declare to packed, marked, and labeled, and are in all respects in If I am a large quantity generator, I certify that I have a practicable and that I have selected the practicable metand the environment; OR, if I am a small quantity generavailable to me and that I can afford.	a program in place t	to reduce the volume and toxic	ity of waste gene	rated to	I and national govern the degree I have de	nmental re etermined	egulations. I to be economically			
17	Printed/Typed Name FO ODEGARD Transporter 1 Acknowledgement of Receipt of Mate		Signatura Odl	gan				onth Day Year			
4760	Printed/Typed Name FSZ Mowboot	the state of the s	Signature	Ma	42_		M	onth Day Year			
18.	Transporter 2 Acknowledgement of Receipt of Mater Printed/Typed Name	rials	Signature		1			onth Day Year			
	Discrepancy Indication Space	1.22.4			•			onth Day Year			
20.	Facility Owner or Operator: Certification of receipt o	f hazardous materi	als covered_by this manifest	except as noted	in Item 1	19.	,				
	Printed/Typed Name NKC Deccon		Signature	1	()	00	Mo	onth Day Year			
		1	1100		VV	V	()	12199			

T/S/D/F COPY

a. FO. MASTE FLAMMARE LICUID. INTERPRETATION OF THE PRINT PENALS MATERIAL DUDGE OF STATES AND DOUGH OF ST		News China	NONE Emergency	Contact Telepho	one Num	ber					
3. Generator's Name and Mailing Address 4. Generator's Phone () 5. Transporter 1 Company Name 6. US EPA ID Number 7. Transporter 1 Company Name 6. US EPA ID Number 7. Transporter 1 Company Name 8. WS EPA ID Number 9. Seats Transporter 1 D. 1. Transporter 1 Company Name 1. Transporter 2 Name Name 1. Transporter 3 Name Name 1. Transpor		UNIFORM HAZARDOUS WASTE MANIFEST			5 Social	nifest	2. Pa	morman	on in the	shaded areas is	
5. Transporter 1 Company Name 0. US EPAID Number 1. An OS EPAID Number 1. An OS EPAID Number 2. State Transporter 1 D. 3. Transporter 2 Company Name 0. US EPAID Number 1. An OS EPAID Number 1. An OS EPAID Number 2. State Transporter 3 D. 3. Transporter 3 D. 4. Transporter 4 Enough 1. State Transporter 3 D. 5. Transporter 4 Enough 1. State Transporter 3 D. 6. State Transporter 5 D. 7. Trainsporter 5 D. 7. Trainsporter 5 D. 8. State Transporter 5 D. 9. Discrepancy Indication 5 Space 10. Discrepancy Indication 5 Space 10. Discrepancy Indication 5 Space 11. Transporter 5 D. 11. Transporter 5 D. 12. Discrepancy Indication 6 Facept of Mate		3. Generator's Name and Mailing Address ODE GARDS BODY SHOP 4/12 40, WORSHINGTON					Ax State Manifest Document Number 990252750A				
7. This plane 2 Company Name 0. Transporter 197 1. Sales Transporter 197 1. Sales Transporter 1 Aboromodegement of Receipt of Materials 197 1. Transporter 1 Aboromodegement of Receipt of Materials 197 1. Transporter 1 Aboromodegement of Receipt of Materials 197 1. Transporter 1 Aboromodegement of Receipt of Materials 197 1. Transporter 1 Aboromodegement of Receipt of Materials 197 1. Transporter 1 Aboromodegement of Receipt of Materials 197 1. Transporter 1 Aboromodegement of Receipt of Materials 197 1. Transporter 1 Aboromodegement of Receipt of Materials 197 1. Transporter 1 Aboromodegement of					9						
Additional Description for Materials Listed Above 1. Additional Description for Materials Listed Above 2. Special Mandling Instructions and Additional Information 1. Use EPG# 12S for 11a. For Emergency 1-800-282-912S 1. Additional Description for Materials Listed Above 2. Facility Owner or Duton in all respects in proper condition for transport by highway according to applicable informational and anternal governmental regulations. 1. If an a large quantity generated, Learly that have a program in place to reduce the volume and looking of waste generated to the degree I have described above by proper disports parameter described presidence in the mandle and the waste management method that president and that have seeded the pencicacies management presidents with minutes the pencil and thus threat the tournan head presidents and the president for penciles of the anternal tensor of the president of the anternal penciles of the anternal Listed Above the minutes the pencile with minutes the pencile minut			6				1999年の大学の大学の大学の大学の大学の大学の大学の大学の大学の大学の大学の大学の大学の				
CleanCare Corporation Islo Taylor May Tacoma WA 98421 11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Numbar)		7. Transporter 2 Company Name	8	WADSOCA 77	Number	•			253)	627 1976	
CleanCare Corporation Tacoma WA 98421 H. Facility's Phone Tacoma WA 98421		9- Designated Facility Name and Sito advisor	XXXXXXXXXX	MAXXXXVIOGEN (6)			D0000000000000000000000000000000000000	THE SECRETARY OF SHAPE PARTY SHAPE AND ADDRESS OF THE SECRETARY SHAPE ADDRESS OF THE SECRETARY SHAPE AND ADDRESS OF THE SECRETARY SHAPE ADDRESS OF THE SECRETARY SHAPE AND ADDRESS OF THE SECRETARY SHAPE AND ADDRESS OF THE SECRETARY SHAPE ADDRESS OF THE SECRETARY S	The state of		
Tacoma MA 98421 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12. Containers 13. 14. 14. 14. 15. 15. 15. 15. 15. 15. 15. 15. 15. 15		CleanCare Corporation		6 08 EPA19	Number	mm	G. Sta				
Social Containers 13		1510 Taylor Way Tacoma WA 98421	1		.2		H. Fa	cility's Phone	A previous has act is	E TEG ESTATE	
D. J. Additional Descriptions for Materials Listed Above J. Additional Listed Above		НМ		and ID Number)			1'-	13. Total	14. Unit	Sign of the last	
d. J. Additional Descriptions for Materials Listed Above 1.a. Acetone, Toluene, Mineral Spirits, Methanol, Xylene 1.b. Special Handling Instructions and Additional Information 1.a. Use EPG# 125 for 11a. For Emergency 1–800–282–8128 1.b. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classific packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations. If I am a large quantity generator, Lentify that have a program in place to reduce the volume and toolicity of waste generated to the degree I have described and that I have selected the practicable method of treatment, alorage, or disposal currently available to me which minimizes the present and future threat to human have a required and the appropriate of the degree I have described and the present and future threat to human have a required to the appropriate threat to human have a required to the appropriate threat described to his and that I can afford. Printed/Typed Name Signature Month Day Yee 19. Discrepancy Indication Space Signature Month Day Yee 19. Discrepancy Indication Space Signature Month Day Yee Printed/Typed Name Signature Month Day Yee Printed/Typed Name Signature Month Day Yee 19. Discrepancy Indication Space		N.O.S., 3,PG II, UN1993.(Acetone, Toluen	UID,	to property	1	000	00	00.0.0.0	0	001 D035 F003 05 MT02	
d. J. Additional Descriptions for Materials Listed Above 11a. Acetone, Toluene, Mineral Spirits, Methanol, Xylene 2. Proprietal Handling Instructions and Additional Information 11a. Use EPC# 12S for 11a, For Emergency 1–800–282–8128 11b. General Handling Instructions and Additional Information 11a. Use EPC# 12S for 11a, For Emergency 1–800–282–8128 11b. General Handling Instructions and Additional Information 11a. Use EPC# 12S for 11a, For Emergency 1–800–282–8128 11b. General Handling Instructions and Additional Information 11a. Use EPC# 12S for 11a, For Emergency 1–800–282–8128 11b. General Handling Instructions and Additional Information 11a. Use EPC# 12S for 11a, For Emergency 1–800–282–8128 11b. General Handling Instructions and Additional Information 11a. Use EPC# 12S for 11a, For Emergency 1–800–282–8128 11b. It am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economical and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize the present and future that the town have available to me and that I can allow. Printed/Typed Name Signature Month Day Yee 11b. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Signature Month Day Yee 11b. Transporter 2 Acknowledgement of Receipt of Materials Signature Month Day Yee 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Signature Month Day Yee 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.	E Z E	1 3 UNI263	PGIL.	MATERIAL		: ./	DM	55	4	0001,000 0035,000	
J. Additional Descriptions for Materials Listed Above I.a. Acetone, To luene, Mineral Spirits, Methanol, Xylene J. Prople A 1792 15. Special Handling Instructions and Additional Information I.a. Use EPG# 12S for 11a, For Emergency 1–800–282–8128 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classific packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable informational and national governmental regulations. If I am a large quantity operator, I certify that I have a program in place to reduce the volume and bacticy of wasts generated to the degree I have determined to be economical and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human he available to me and that I can afford. Printed/Typed Name Signature Month Day Ye 19. Discrepancy Indication Space Month Day Ye 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.	ATO	C.								7	
11. Acetone, Toluene, Mineral Spirits, Methanol, Xylene 2. Special Handling Instructions and Additional Information 1. Use EPG# 128 for 11a, For Emergency 1–800–282–8128 1. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classific packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economical practicable method of treatment, is strange, or disposal currently available to me with minimizes the present and future threat to human have available to me and that I can afford. Printed/Typed Name Signature Month Day Yes 19. Discrepancy Indication Space Month Day Yes Printed/Typed Name Signature Month Day Yes Signature Month Day Yes 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.		d.		,		•				Billion of the state of the sta	
11. Acetone, Toluene, Mineral Spirits, Methanol, Xylene 2. Special Handling Instructions and Additional Information 1. Use EPG# 128 for 11a, For Emergency 1–800–282–8128 1. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classific packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economical practicable method of treatment, is strange, or disposal currently available to me with minimizes the present and future threat to human have available to me and that I can afford. Printed/Typed Name Signature Month Day Yes 19. Discrepancy Indication Space Month Day Yes Printed/Typed Name Signature Month Day Yes Signature Month Day Yes 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.	П	J. Additional Descriptions for Materials Listed Above	Assemble of American St	ter tresta a			V Han	line Cadas for Mr.	100111		
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economical practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human hea and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that available to me and that I can afford. Printed/Typed Name Signature Month Day Ye 18. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Signature Month Day Ye 19. Discrepancy Indication Space		15. Special Handling Instructions and Additional Info	rmation	Citeds Conjugati Spidart	a rous, y		a. F	SUBS	yatio of	ek i specialistica (na proposition (na proposi	
and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that available to me and that I can afford. Printed/Typed Name 17. Transporter 1 Acknowledgement of Receipt of Materials		passes, married, and labeled, and are in all respects	in proper condition for the	ansport by nighway accor	ding to applic	able inter	mational	and national government	nental red	gulations.	
To Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Signature Month Day Ye Month Day Ye Signature Month Day Ye Day Ye Signature Month Day Ye Signature Signature Month Day Ye Signature Signature Month Day Ye Signature Month Day Ye Signature		and the environment; OR , if I am a small quantity ge available to me and that I can afford.									
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Signature Month Day Ye 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Signature Month Day Ye 19. Discrepancy Indication Space 19. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Signature Month Day Ye Signature	*			1	2/		/	-	Mo	onth Day Year	
19. Discrepancy Indication Space Printed/Typed Name 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Signature Month Day Year	TR		iterials	gra or	uge	co				1/1 7.9	
19. Discrepancy Indication Space Printed/Typed Name 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Signature Month Day Year	AZOP	JEZ MONDO		Signature	117	Mit	2		Mo	onth Day Year	
19. Discrepancy Indication Space Printed/Typed Name 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Signature Month Day Year	ORT		terials	10:			/-				
Printed/Typed Name Signature Month Day Year	R	, mad typed traine		Signature					Moi	nth Day Year	
A C C C C C C C C C C C C C C C C C C C		19. Discrepancy Indication Space									
T Y Printed/Typed Name Signature Month Day Yea	A										
Printed/Typed Name Signature Month Day Ye	LIT	20. Facility Owner or Operator: Certification of receipt	t of hazardous materia	ls covered by this manif	est except a	s noted i	n Item 1	9.			
			for ce	Signature	L	(CUC	ac	Mor	nth Day Year 7 2 9	

NOME Emergency Contact Telephone Number

	UNIFORM HAZARDOUS WASTE MANIFEST 1. Generator's US	SEPAID No. 25.0.1.7.35	Manifest No.7	2. Pa	Illioitilau		shaded areas is ederal law.		
1		9205 BODY	/	Av State Manifest Document Number 990252750A B. State Generator's ID					
		nA WAG							
	5. Transporter 1 Company Name	mpany Name 6. US EPA ID Number C. State					A Comment		
	CloanCaro 7. Transporter 2 Company Name	8. US EPA ID		D. Tra	insporter's Phone ite Transporter's II	253)	627-1976		
				-	nsporter's Phone				
ŀ		10. US EPAID N	lumber*****	G. Sta	te Facility's ID				
	CleanCare Corporation 1510 Taylor Way Tacoma WA 98421	WAD93073851	2	H. Facility's Phone					
				12061-627-1976					
	US DOT Description (Including Proper Shipping Name, Hazard Class HM	s, and ID Number)	12. Cont	1	13. Total	14. Unit Wt/Vol	and office.		
	a. T. FO. WASTE FLAMMABLE LIQUID. 1.0.2. 3.PG II. UN1993.(Acetone, Tolugne)		000	() ()	Quantity Q.O.O.O.D		Waste No.		
- GHZ	b. WASTE PAINT PEZATED	MATERIAL	1	Dud	0.0.0.0	1	0001,0007		
ER	3 UN1263 PGI	,	/	1/14/	2.5	(7	5003, FOX, 11		
A T O R	c.								
	d	•	•						
1	J. Additional Descriptions for Materials Listed Above				dling Codes for Wa		1965-754-8		
1	1a. Acetone, Toluene, Mineral Spirits, Me // PPOFILE # 11792 15. Special Handling Instructions and Additional Information	ptidiscopis to Alberta s pragred spri sozial	n (S) (w. apalitetra		SUBS		Checker in contract of the con		
- P	la. Use EPS# 128 for 11a. For Emergenc	y 1-800-182-61	.28			1			
	16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of packed, marked, and labeled, and are in all respects in proper condition for If I am a large quantity generator, I certify that I have a program in place practicable and that I have selected the practicable method of treatment, s and the environment; OR, if I am a small quantity generator, I have made	transport by highway accord to reduce the volume and to torage, or disposal currently	ding to applicable inte exicity of waste general available to me which	rnational rated to the minimize	and national government and hate degree I have do not be present and	nmental re etermined future thr	egulations. I to be economically reat to human health		
	available to me and that I can afford. Printed/Typed Name	Signature	71	/		M	onth Day Year		
*	LEO ODEGARD	1.60	legan	7 .		14	27/15/99		
TRA	17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name	Cirroture	1/2	,					
TRAZSPORTER	Fiz marsock	Signature	THIM	R		IC.	onth Day Year		
OR	18. Transporter 2 Acknowledgement of Receipt of Materials			1					
ER	Printed/Typed Name	Signature				M	onth Day Year		
	19. Discrepancy Indication Space				``.				
FACI									
	20. Facility Owner or Operator: Certification of receipt of hazardous mate	rials covered by this manif	est except as noted	in Item	19.				
Y	Printed/Typed Name	Signature	1	1		Me	onth Day Year		
	Mike Deacen tor a	lile	de .	(Gil	eli-		7 2.11		

TRANSPORTER #2

NOTICE OF LAND DISPOSAL RESTRICTION OF WASTE

TO: CLEANCARE CORPORATIO (Designated Facility)	N	EPA ID NO.:		980738512 ated Facility)				
1510 Taylor	Way	Tacoma, WA 98421						
(Address)		idooma, vv.	A 30421					
The wastes identified on this form a	are subject	t to the Land Disposal rest	rictions of	40 CFR Part 26				
(Check boxes that apply) Waste Name	EPA Waste Code	The Waste May Contain the Following Restricted Constituents						
Waste Petroleum Naptha	D001	Ignitable liquid (10% TOC)	X	Non Wastewater Wastewater				
	D008	Lead		VVastewater				
	D018	Benzene						
	D039	Tetrachloroethylene						
In accordance with 40 CFR(7)	(a), the unde	erlying hazardous contituent like Toluene Xylene Ethyl Benzene III Trichloroethane	ly to be pre	sent are:				
		* * *						
Waste Compound Cleaning Liquid/Submersion Cleaner (Non-chlorinated)	D001	Ignitable liquid (10% TOC)	×	Non Wastewater Wastewater				
	D018	Benzene						
	D039	Tetrachloroethylene		1				
Waste Lacquer Thinner (or Gunwash)	D001 F003	(10% TOC) Xylene, Methanol, Acetone	X	Non Wastewater Wastewater				
	F005	Toluene, MEK		Wasiewater				
The constituent composition is based on used, the process which created the wide Generator Name:	raste and wa	Aste characterization data).	•	the chemical(s)				
EPA ID #: 401708250173	5	Manifest #: 52752	> '.					
Generator Signature: X XLOC	digo	and	Date: _7/	15/4				
Printed Name and Title of Representati	ve: × L	EO ODECARD PO	RES.					
CleanCare Corp.® manages the above applicable elements of the land disposa	wastes thro	ugh its recycling and fuels progr	ams in acco					

A Trimac Company

CleanCare Corp.

Material Information Sheet

City: TACOMA

Phone: 253-536-9083

EPA ID#: WAD082501735

State: WA

Contact: RICH

Zip: 98409

Profile Number: 11792

Cert. Date:

9/18/97 9/17/98

Review Date:

Mailing Address

Name: ODEGARDS BODY SHOP Address: 4112 SOUTH WASHINGTON

City: TACOMA State: WA Zip: 98409 Phone: 253-536-9083

Contact: RICH

WASTE MATERIAL

FormCode: B209 WasteName: ProcessCode: M061

Generating Site

Name: ODEGARDS BODY SHOP

Address: 4112 SOUTH WASHINGTON

WASTE PAINT SOLVENTS

WasteProcess:

CLEANING PAINTING EQUIPMENT

WASTE CHARACTERISTICS WasteColor: VARIES

PhysicalState: LIQUID pHRange:. 6-8

FlashPoint: 32 **METALS**

PPM Arsenic: <5

Barium: <100 Cadmium: <1 Chromium: <10,000

SourceCode: A21

PercentSolid: <5 SpecificGravity: 0.97 Layers: BI-LAYERED

BTUValue: >5,000 PPM

Lead: <5 Mercury: <.2 Seleneum: <1 Silver: <5

Generic Profile: N SampleNumber:

TreatmentCode:

AnalyticalCode:

MSDSCode: Y

PCBs: NEG Cyanides: NEG Sulfides: NEG Phenolics: NEG

PPM Nickel: <134

Thallium: <130 HexChrome: 0

WASTE CODES Federal: D001 Comments:

D007 D035

D043 F003 State: WT02

Designation Code: D

Min	Max
. 15	20
	20
	15
5	10
5	10
5	10
1	5
2	. 15
2	1. 5
2	5
2	5
2	5
**************************************	105
	Min 15 15 10 5 5 1 2 2 2 2 2

ShipDOT_PSN: WASTE PAINT RELATED MATERIAL

ShipAdditinalDesc:

ShipHazardClass: 3

ShipDOT_id: UN1263

ShipPackingGroup: II

I hereby certify that as an authorized representative of the generator named above, that the above attached description is complete and accurate to the best of my knowledge and ability to determine, that no deliberate or willful omission of composition or properties exist, and that all known or suspected hazards have been disclosed. I certify that the materials tested are representative of all materials subject to the contract.

Signature

Title

Printed Name